



On the Radar

Issue 676

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On the Radar

Editor: Dr Niall Johnson

Books

Management of type 2 diabetes: A handbook for general practice

Royal Australian College of General Practitioners and Diabetes Australia
Melbourne: RACGP; 2024. p. 326.

URL	https://www.racgp.org.au/clinical-resources/clinical-guidelines/key-racgp-guidelines/view-all-racgp-guidelines/management-of-type-2-diabetes/
Notes	Diabetes Australia and the Royal Australian College of General Practitioners (RACGP) have released a new edition of the 'Diabetes Handbook' to equip general practitioners with updated, evidence-based guidelines on managing type 2 diabetes.

Journal articles

Intergenerational equity and the health of Australia's young people

Zuccala E, Skilton M

Medical Journal of Australia. 2024;221(10):505-505.

The Future Healthy Countdown 2030 consensus statement: core policy actions and measures to achieve improvements in the health and wellbeing of children, young people and future generations

Lycett K, Lane H, Frykberg G, Maury S, Wallace C, Taafua L, et al

Medical Journal of Australia. 2024;221(S10):S6-S17.

Guidelines for the design and implementation of youth participation initiatives to safeguard mental health and wellbeing

Guo K, Meas D, Mautner D, Yan F, Al-Hadaya I, Donohoe-Bales A, et al.

Medical Journal of Australia. 2024;221(S10):S34-S40.

DOI	Zuccala and Skilton https://doi.org/10.5694/mja2.52515 Lycett et al https://doi.org/10.5694/mja2.52494 Guo et al https://doi.org/10.5694/mja2.52485
Notes	<p>In their piece in the <i>Medical Journal of Australia</i> (MJA), Zuccala and Skilton observe that it's known that 'childhood and adolescence are a critical window for investing in the health of populations. Simply put, ensuring young people have a safe and healthy start to life pays dividends across the life course for individuals, their families, and communities.' However, as they also note, 'Australia's children and adolescents continue to face enormous threats to their lifelong health and wellbeing.' This issue of the MJA (https://onlinelibrary.wiley.com/toc/13265377/2024/221/10) is dedicated to child and adolescent health while a supplement (Volume 221, Issue S10 https://onlinelibrary.wiley.com/toc/13265377/2024/221/S10) focuses on The Future Healthy Countdown 2030.</p> <p>In the supplement Lycett et al offer The Future Healthy Countdown 2030 consensus statement. The statement's main recommendations include:</p> <ul style="list-style-type: none"> • Provide financial support to invest in families with young children and address poverty and material deprivation in the first 2000 days of life. • Establish a national investment fund to provide sustained, culturally relevant, maternal and child health and development home visiting services for the first 2000 days of life for all children facing structural disadvantage and/or adversity. • Implement a dedicated funding model for Aboriginal and Torres Strait Islander community-controlled early years services across the country to ensure these services are fully resourced to provide quality early learning and integrated services grounded in culture and community. • Properly fund public schools, starting by providing full and accountable Schooling Resource Standard funding for all schools, with immediate effect for schools in communities facing structural disadvantage. • Establish legislation and regulation to protect children and young people aged under 18 years from the marketing of unhealthy and harmful products. • Amend the electoral act to extend the compulsory voting age to 16 years. • Legislate an immediate end to all new fossil fuel projects in Australia. • Establish a federal Future Generations Commission with legislated powers to protect the interests of future generations. <p>Also in the supplement, Guo et al offer some guidelines on the design and implementation for youth participation in one of the most pressing issues, mental health and wellbeing. The recommendations here address</p> <ul style="list-style-type: none"> • prioritising clear and respectful communication;

	<ul style="list-style-type: none"> • creating safe and flexible practices for young people; • facilitating social and emotional support; • empowering young people to participate in meaningful and impactful ways; and • supporting young people to develop skills.
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Mental health of Australian frontline nurses during the COVID-19 pandemic: results of a large national survey
 Zamanzadeh A, Eckert M, Corsini N, Adelson P, Sharplin G
 Health Policy. 2024;105214.

DOI	https://doi.org/10.1016/j.healthpol.2024.105214
Notes	<p>Also examining mental health is this study that looked at the mental health impacts on nurses during the COVID-19 pandemic. The study used ‘de-identified self-report survey data from approximately 11,000 Australian nurses and midwives during the pandemic’ and from their analyses the authors identified a number of ‘highlights’:</p> <ul style="list-style-type: none"> • ‘Increased work demands worsen anxiety, depression and stress of frontline nurses • Quantitative and emotional demands are positively associated with burnout during COVID-19 • Emotional demands have sizable effects on people with severe mental symptoms • Hospital nurses experience increased anxiety, depression, and stress during a pandemic • Concerns about job security lead to poorer mental health among nurses.’

Exploring Consumer and Clinician Attitudes towards Patient Reported Outcome Measures (PROMs) in an Australian Inpatient Musculoskeletal Rehabilitation Unit: A Qualitative Pilot Study
 Di Rico R, Ng L, Capell JT.
 Patient Experience Journal. 2024;11(3):16-28.

Co-developing a Paediatric Patient Reported Experience Measure: The Perspectives of Children and Young People
 Barr KR, Nikolovski J, White L, Elliott S, McCartney L, Treadgold C, et al.
 Patient Experience Journal. 2024;11(3):64-72.

URL	Di Rico et al https://doi.org/10.35680/2372-0247.1851 Barr et al https://doi.org/10.35680/2372-0247.1924
Notes	<p>A pair of items in the latest issue of <i>Patient Experience Journal</i> (PXJ) on the topic of PROMs/PREMs (patient reported outcome measures and patient reported experience measures). Another commonality to these two studies is that they are both Australian studies.</p> <p>Di Rico et al describe the experience of working with rehabilitation clinicians and consumers to examine the relevance and utility of patient reported outcome measures (PROMs) in that setting. They noted that ‘While the potential benefits of PROMs were recognised, numerous risks and logistical challenges were also identified.’</p> <p>Barr et al describe a project that sought to capture the views of children and young people in the co-design of Paediatric Patient Reported Experience Measures (PREMs). The project included interviews with 55 children and young people from a diverse range of sociocultural backgrounds, across six Australian hospitals. It is noted that the ‘Interviews were conducted by ‘Captain Starlight’, professional performers who engage with children and positively impact their hospital experience’.</p>

	It is noted that the Australian Commission for Safety and Quality in Health Care provided input for the data analysis and report writing of this study
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For information on the Commission’s work on patient-reported measures, including PROMs and PREMs, see <https://www.safetyandquality.gov.au/our-work/partnering-consumers/person-centred-care/person-centred-care-network/patient-reported-measures>

BMJ Quality & Safety

Volume 33, Issue 12, December 2024

URL	https://qualitysafety.bmj.com/content/33/12
Notes	<p>A new issue of <i>BMJ Quality & Safety</i> has been published. Many of the papers in this issue have been referred to in previous editions of <i>On the Radar</i> (when they were released online). Articles in this issue of <i>BMJ Quality & Safety</i> include:</p> <ul style="list-style-type: none"> • Editorial: Safety netting: time to stop relying on verbal interventions to manage diagnostic uncertainty? (Georgia B Black) • Editorial: Beyond polypharmacy to the brave new world of minimum datasets and artificial intelligence: thumbing a nose to Henry (Adam Todd, Barbara Hanratty) • Editorial: Integration and connection: the key to effectiveness of large-scale pharmacist-led medication reviews? (A Husband, A Robinson-Barella) • Role of communicating diagnostic uncertainty in the safety-netting process: insights from a vignette study (Caitríona Cox, T Hatfield, Zoë Fritz) • Longitudinal cohort study of discrepancies between prescribed and administered polypharmacy rates: implications for National Aged Care Quality Indicator Programs (Nasir Wabe, Rachel Urwin, Karla Seaman, Johanna I Westbrook) • Crowdsourcing a diagnosis? Exploring the accuracy of the size and type of group diagnosis: an experimental study (Jonathan Sherbino, Matt Sibbald, Geoffrey Norman, Andrew LoGiudice, Amy Keuhl, Mark Lee, S Monteiro) • How therapeutic relationships develop in group-based telehealth and their perceived impact on processes and outcomes of a complex intervention: a qualitative study (Luis F Sousa Filho, M K Farlie, T P Haines, P Malliaras) • Components of pharmacist-led medication reviews and their relationship to outcomes: a systematic review and narrative synthesis (Miriam E Craske, Wendy Hardeman, Nicholas Steel, Michael J Twigg) • Why a sociotechnical framework is necessary to address diagnostic error (Meagan M Ladell, Sarah Yale, Brett J Bordini, Matthew C Scanlon, Nancy Jacobson, Elizabeth Lerner Papautsky)

Journal of Patient Safety

Volume 20, Issue 8, December 2024

URL	https://journals.lww.com/journalpatientsafety/toc/2024/12000
Notes	<p>A new issue of <i>Journal of Patient Safety</i> has been published. Articles in this issue of <i>Journal of Patient Safety</i> include:</p> <ul style="list-style-type: none"> • “What Else Could It Be?” A Scoping Review of Questions for Patients to Ask Throughout the Diagnostic Process (Mary A Hill, Tess Coppinger, Kimia Sedig, W J Gallagher, K M Baker, H Haskell, K E Miller, K M Smith) • Associations Between Oversedation and Agitation in Postanesthesia Recovery Room and Subsequent Severe Behavioral Emergencies (Mary Labib, Atousa Deljou, R J Morgan III, D R Schroeder, J Sprung, T N Weingarten)

	<ul style="list-style-type: none"> • The Influence of Hospital Physician Integration on Culture of Patient Safety (Soumya Upadhyay, Lung-Chang Chien) • Exploring the Relationship Between Hospital Patient Safety Culture and Performance on Measures of Hospital-Acquired Conditions (Pejmon Noghrehchi, Jennifer L Hefner, Hendrik Stegall, Daniel M Walker) • Using Patient Experience Surveys to Identify Potential Diagnostic Safety Breakdowns: A Mixed Methods Study (Kelley M Baker, Mark Brahier, Mara Penne, Mary A Hill, Siara Davis, William J Gallagher, K E Miller, K M Smith) • Adverse Events in Patients Transitioning From the Emergency Department to the Inpatient Setting (Dennis Tsilimingras, Jeffrey Schnipper, Lying Zhang, Phillip Levy, Steven Korzeniewski, James Paxton) • Knowledge and Practices Regarding Prevention of Central Venous Catheter Removal-Associated Air Embolism: A Survey of Nonintensive Care Unit Medical and Nursing Staff (Maria Karlinskaya, Liad Scharf, Nadav Sarid) • Patient Safety and Perception of Quality in University Dental Hospitals: A French National Survey (Pierre Hervy, Brigitte Keriven-Dessomme, Alexandra Cloitre, Béatrice Thivichon-Prince, Bérengère Phulpin, Anne-Gaëlle Chaux) • Increased Risk and Unique Clinical Course of Patient Safety Indicator-3 Pressure Injuries Among COVID-19 Hospitalized Patients (Jennifer B Cowart, Jorge Sinclair De Frías, Benjamin D Pollock, Camille Knepper, Nora Sammon, Sadhana Jonna, Trisha Singh, Shivang Bhakta, Lorenzo Olivero, Shari Ochoa, Kannan Ramar, Pablo Moreno Franco) • Assessing Between- and Within-Hospital Differences in Patient Safety Between Medicaid and Privately Insured Hospital Patients (A Gangopadhyaya) • The Predictors of Patient Safety Culture in Hospital Setting: A Systematic Review (Anja Vibe, Sara Haurum Rasmussen, Nikolaj Ohm Pranger Rasmussen, Doris Østergaard, Peter Dieckmann) • Rethinking Surgical Safety: Investigating the Impact of Gamified Training on Severe Flow Disruptions in Surgery (Tara Cohen, Falisha Kanji, Jennifer Zamudio, Catherine Breese, Ray Avenido, Christine Yoshizawa, Stephanie Bartkowicz, Kenneth Catchpole, Jennifer Anger) • Involving Patients and/or Their Next of Kin in Serious Adverse Event Investigations: A Qualitative Study on Hospital Perspectives (Linda J Knap, Rachel I Dijkstra-Eijkemans, Roland D Friele, Johan Legemaate) • Clinical Characteristics and Outcomes of Patients With COVID-19 Treated in Mayo Clinic's Advanced Care at Home Program (Rachel A Gothot, Michael J Maniaci, Margaret R Paulson, Igor Dumic, Amy A Haney, Zhuo Li, Karla C Maita, Brittanee T Valles, Charles D Burger) • Editorial: From Compliance to Collaboration: Learning From Transatlantic Frameworks for Healthcare Safety Improvement (Olivia Lounsbury, Mark Sujjan, Ken Catchpole) • Intraoperative Fall of an Obese Patient During an Interventional Radiology Procedure (Brian Liu, Shayan Sadiq, Helen Wang, Estele Odo de Barros, Zhuoxuan Li, Kevin Nguyen, Sujai Jaipalli, Molly Li, Robert P Liddell) • Second Victims in Mental Health Care (Deborah Oyine Aluh, Jesus David Cortes) • Enhancing Compliance With Work-Hour Restrictions Through Safety Culture and Leadership in Medical Residencies (Waseem Jerjes)
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URL	https://www.longwoods.com/publications/nursing-leadership/27462/1/vol.-37-no.-2-2024
Notes	<p>A new issue of <i>Nursing Leadership</i> has been published. Articles in this issue of <i>Nursing Leadership</i> include:</p> <ul style="list-style-type: none"> • Editorial: What Do Genomics, Float Pools and Cardiac Surgery Have in Common? Innovating Nurses (Ruth Martin-Misener) • Foreword: Fostering Innovation Through Nursing Retention Strategies (Leigh Chapman) • Manitoba’s Provincial Travel Nurse Team: A Unique Staffing Model for Nurses (Monika Warren and Nicole Sneath) • Leadership Strategies for Genomics Integration: A Descriptive Study Using the Canadian Adaptation of the Genetics and Genomics Nursing Practice Survey (Jacqueline Limoges, Rebecca Puddester, April Pike, Kathy Calzone, Lindsay Carlsson, Nicole Letournea and Andrea Gretchev) • Fostering Pan-Canadian Collaboration to Advance Nursing Workforce Development: A Case Study From the Genomics Experience (Patrick Chiu, Andrea Gretchev, Jacqueline Limoges, Rebecca Puddester, Lindsay Carlsson, April Pike, Kathleen Leslie and Dzifa Dordunoo) • Optimizing the New Model of Nurse Practitioner Regulation in Canada to Support the Integration of Genomics (Michelle Acorn, Patrick Chiu, Jacqueline Limoges and Andrea Gretchev) • Nurse-Led Clinical Pathway Development for Cardiac Surgery: A Systematic Quality Improvement Approach (Clare Koning, Leonard Eulalia, Amar Sriram, Eunice Cho and Sheila Finamore)

International Journal for Quality in Health Care online first articles

URL	https://academic.oup.com/intqhc/advance-articles
Notes	<p><i>International Journal for Quality in Health Care</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Exploring the Development of Safety Culture among Physicians with Text Mining of Patient Safety Reports: A Retrospective Study (Daisuke Koike et al) • Optimizing Neurosurgery Clinic Operations: A Comparative Study of Interventions in Finland’s Public Healthcare System (Jukka Huttunen and Timo Koivisto) • The Influence Mechanism Analysis of Family Doctor Team Effectiveness: A Mixed-method Approach (Anning He et al) • Developing a Patient-Centered Computerized Clinical Decision Support System with Patient-Level Outcome Measures (Mari Nezu et al) • Setting Standards in Residential Aged Care: Identifying Achievable Benchmarks of Care for Long-term Aged Care Services (Johannes Schwabe et al) • Examining the joint effect of clinical quality, meaningful use of HIT and patient-caregiver interaction on mortality rates in US acute care hospitals (Aber Elsaleiby)

Online resources

Residential Aged Care Communiqué

<https://www.thecommuniques.com/aged-care>

The team that develops the *Clinical Communiqué* and the *Future Leaders Communiqué* also develop a *Residential Aged Care Communiqué*. The latest issue is now available.

Australian Living Evidence Collaboration

<https://livingevidence.org.au/>

[USA] Effective Health Care Program reports

<https://effectivehealthcare.ahrq.gov/>

The US Agency for Healthcare Research and Quality (AHRQ) has an Effective Health Care (EHC) Program. The EHC has released the following final reports and updates:

- Use of **Life Cycle Assessment in the Healthcare Industry**: Environmental Impacts and Emissions Associated With Products, Processes, and Waste
<https://effectivehealthcare.ahrq.gov/products/lifecycle-assessment/tech-brief>
- Linking **Dental Services to Treatment Outcomes for Diabetes**: A Rapid Response Review
<https://effectivehealthcare.ahrq.gov/products/treatment-outcomes-diabetes/rapid-research>
- Linking **Dental Services to Treatment Outcomes for Chronic Kidney Disease**: A Rapid Response Review
<https://effectivehealthcare.ahrq.gov/products/treatment-outcomes-chronic-kidney/rapid-research>
- The Association Between Outcomes and **Dental Services in Persons With Autoimmune Disease** Treated With Biologics and Other Immunosuppressants: A Rapid Response Review
<https://effectivehealthcare.ahrq.gov/products/autoimmune-disease/rapid-research>

COVID-19 resources

<https://www.safetyandquality.gov.au/covid-19>

The Australian Commission on Safety and Quality in Health Care has developed a number of resources to assist healthcare organisations, facilities and clinicians. These and other material on COVID-19 are available at <https://www.safetyandquality.gov.au/covid-19>

These resources include:

- **Poster – Combined contact and droplet precautions**
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/infection-prevention-and-control-poster-combined-contact-and-droplet-precautions>

STOP VISITOR RESTRICTIONS MAY BE IN PLACE

For all staff
Combined contact & droplet precautions*
in addition to standard precautions

Before entering room/care zone

- 1 Perform hand hygiene
- 2 Put on gown
- 3 Put on surgical mask
- 4 Put on protective eyewear
- 5 Wear gloves, in accordance with standard precautions

At doorway prior to leaving room/care zone

- 1 Remove and dispose of gloves if worn
- 2 Perform hand hygiene
- 3 Remove and dispose of gown
- 4 Perform hand hygiene
- 5 Remove protective eyewear
- 6 Perform hand hygiene
- 7 Remove and dispose of mask
- 8 Leave the room/care zone
- 9 Perform hand hygiene

What else can you do to stop the spread of infections?

- Always change gloves and perform hand hygiene between different care activities and when gloves become soiled to prevent cross contamination of body sites
- Consider patient placement
- Minimise patient movement

*e.g. Acute respiratory tract infection with unknown aetiology, seasonal influenza and respiratory syncytial virus (RSV)
For more detail, refer to the Australian Guidelines for the Prevention and Control of Infection in Healthcare and your state and territory guidance.

- *Poster – Combined airborne and contact precautions*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/infection-prevention-and-control-poster-combined-airborne-and-contact-precautions>

VISITOR RESTRICTIONS MAY BE IN PLACE

For all staff

Combined airborne & contact precautions

In addition to standard precautions

Before entering room/care zone

- 1

Perform hand hygiene
- 2

Put on gown
- 3

Put on a particulate respirator (e.g. P2/N95) and perform fit check
- 4

Put on protective eyewear
- 5

Wear gloves in accordance with standard precautions

What else can you do to stop the spread of infections?

- Always change gloves and perform hand hygiene between different care activities and when gloves become soiled to prevent cross contamination of body sites
- Consider patient placement
- Minimise patient movement

At doorway prior to leaving room/care zone

- 1

Remove and dispose of gloves if worn
- 2

Perform hand hygiene
- 3

Remove and dispose of gown
- 4

Leave the room/care zone
- 5

Perform hand hygiene (In an anteroom/outside the room/care zone)
- 6

Remove protective eyewear (In an anteroom/outside the room/care zone)
- 7

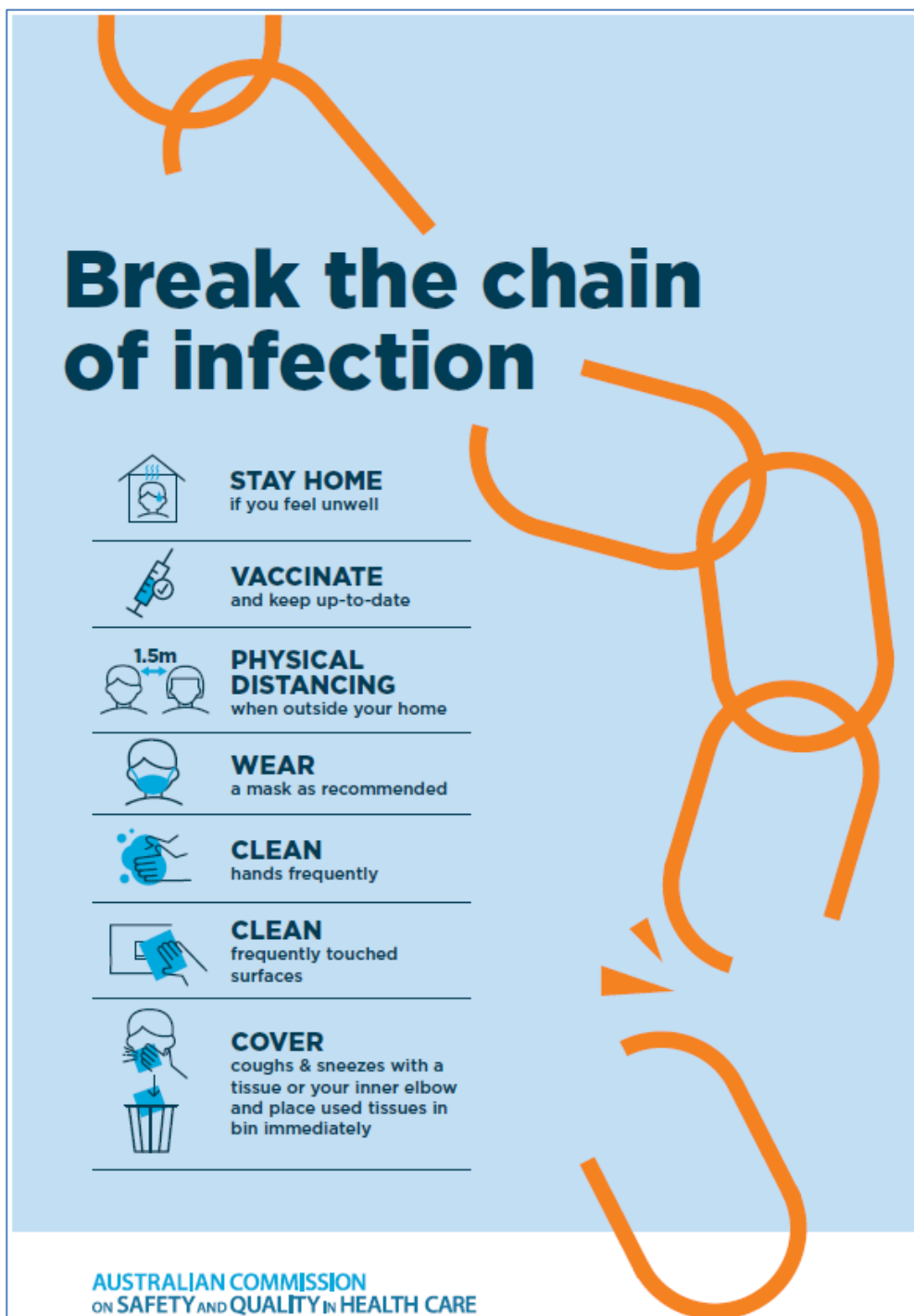
Perform hand hygiene (In an anteroom/outside the room/care zone)
- 8

Remove and dispose of particulate respirator (In an anteroom/outside the room/care zone)
- 9

Perform hand hygiene

KEEP DOOR CLOSED AT ALL TIMES

- *Environmental Cleaning and Infection Prevention and Control*
www.safetyandquality.gov.au/environmental-cleaning
- *COVID-19 infection prevention and control risk management – Guidance*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance>
- *Safe care for people with cognitive impairment during COVID-19*
<https://www.safetyandquality.gov.au/our-work/cognitive-impairment/cognitive-impairment-and-covid-19>
- *Break the chain of infection* poster
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-infection-poster>



- *COVID-19 and face masks – Information for consumers*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-and-face-masks-information-consumers>

**AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE**

**INFORMATION
for consumers**

COVID-19 and face masks

Should I use a face mask?

Wearing face masks may protect you from droplets (small drops) when a person with COVID-19 coughs, speaks or sneezes, and you are less than 1.5 metres away from them. Wearing a mask will also help protect others if you are infected with the virus, but do not have symptoms of infection.

Wearing a face mask in Australia is recommended by health experts in areas where community transmission of COVID-19 is high, whenever physical distancing is not possible. Deciding whether to wear a face mask is your personal choice. Some people may feel more comfortable wearing a face mask in the community.


When thinking about whether wearing a face mask is right for you, consider the following:

- Face masks may protect you when it is not possible to maintain the 1.5 metre physical distance from other people e.g. on a crowded bus or train
- Are you older or do you have other medical conditions like heart disease, diabetes or respiratory illness? People in these groups may get more severe illness if they are infected with COVID-19
- Wearing a face mask will reduce the spread of droplets from your coughs and sneezes to others (however, if you have any cold or flu-like symptoms you should stay home)
- A face mask will not provide you with complete protection from COVID-19. You should also do all of the other things listed below to prevent the spread of COVID-19.

What can you do to prevent the spread of COVID-19?

Stopping the spread of COVID-19 is everyone's responsibility. The most important things that you can do to protect yourself and others are to:

- Stay at home when you are unwell, with even mild respiratory symptoms
- Regularly wash your hands with soap and water or use an alcohol-based hand rub
- Do not touch your face
- Do not touch surfaces that may be contaminated with the virus
- Stay at least 1.5 metres away from other people (physical distancing)
- Cover your mouth when you cough by coughing into your elbow, or into a tissue. Throw the tissue away immediately.



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